BUSINESS REPORT

MONTANA HOUSE OF REPRESENTATIVES 61st LEGISLATURE - REGULAR SESSION

HOUSE HUMAN SERVICES COMMITTEE

Date: Friday, Ma Place: Capitol	arch 6, 200	09		Time: Room:		pm
BILLS and RESOLU Prefix (HB, HR, HJR, S			ber. Add Postponed	(PP) whe	en appro	priate:
HB 634, SB 83, S	SJ <u>5</u>					
EXECUTIVE ACTION Prefix (HB, HR, HJR, Samended) BC(be concurred)	SB, SR, or SJR			(failed) D	PAA (d	lo pass as
HB 634	TIEO	8:8				
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COMMENTS:						
			O Land	Bark) ac	-
			REP. Arler	ne Beck	cer, (Chairman

HOUSE OF REPRESENTATIVES Roll Call HUMAN SERVICES COMMITTEE

DATE: 3609

NAME	PRESENT	ABSENT/ EXCUSED
Rep. Mary Caferro	X	
Rep. Pat Ingraham	X	
Rep. Bill Beck	X	
Rep. Julie French	X	
Rep. Timothy Furey	X	
Rep. David Howard	爱	X
Rep. Chuck Hunter	X	
Rep. Dave McAlpin	X	
Rep. Michael More	- X	
Rep. Pat Noonan	X	
Rep. Ken Peterson	\times	
Rep. Diane Sands	X	
Rep. Cary Smith	X	
Rep. Ron Stoker	X	
Rep. Jeffery Welborn	*	
Rep. Arlene Becker		X

AUTHORIZED COMMITTEE PROXY

I request to be excused from t	he			Luman Services			
Committee because of other commitments. I desire to leave my proxy vote with:							
Indicate Bill number and your vote Aye or No. If there are amendments, list them by name and number under the bill and indicate a separate vote for each amendment.							
BILL/AMENDMENT	AYE	NO		BILL/AMENDMENT	AYE	NO	
06340 leali	+			-			
HB 634	+	<u>.</u>					
as amended							
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Rep. January Date 3-7-09							

AUTHORIZED COMMITTEE PROXY

I request to be excused from the	na /	Lan	0+l	x Hum	an v	Server	26	
Committee because of other co								
Lice Chairmon								
Indicate Bill number and your	Indicate Bill number and your vote Aye or No. If there are amendments, list them by name and number under the bill and indicate a separate vote for each amendment.							
BILL/AMENDMENT	AYE	NO		BILL/AMEND	MENT		AYE	NO
NB 434		V						
063401.A/J								
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Rep. Suy	XI	See !	,		Date	3-	6-09	9
(Signat	ure)	v- v						

AUTHORIZED COMMITTEE PROXY

I request to be excused from t	he	De	Uti	1 × / du	man c	Ser	IXCL	<u>′</u>
Committee because of other co		. (`		//	-) • • • • • • • • • • • • • • • • • • •	
Indicate Bill number and your number under the bill and indi	vote A	ye or N	o. If the	ere are amend	lments, lis		by nam	e and
BILL/AMENDMENT	AYE	NO		BILL/AMEND	MENT		AYE	NO
HB 134	·	V]					
063401.Alj	V							
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Rep. Javo A	Dyon ure)	rol)		Date	<u>3</u> -	-6-0	19

HOUSE OF REPRESENTATIVES Roll Call Vote HUMAN SERVICES COMMITTEE

DATE 3 6 0 9 BILL	NOH6639 MOTION	NO	
Do Pas	s as Ami	nded	
NAME	AYE	NO	If Proxy Vote, check here & include signed Proxy Form with minutes
Rep. Mary Caferro	/		
Rep. Pat Ingraham		1	
Rep. Bill Beck		/	
Rep. Julie French	/		
Rep. Timothy Furey	/		/
Rep. David Howard		/	1
Rep. Chuck Hunter	/		
Rep. Dave McAlpin	1		
Rep. Michael More		1	
Rep. Pat Noonan	1		
Rep. Ken Peterson		1	
Rep. Cary Smith		Ĵ	
Rep. Diane Sands	/		
Rep. Ron Stoker		1	/
Rep. Jeffery Welborn		1	
Rep. Arlene Becker	1		

Montana House of Representatives Visitors Register

HUMAN SERVICES COMMITTEE Date 3/6/09

Bill No. HB 634	Sponsor(s) Rep.	MCA	1pin	
PLEASE PRINT	PLEASE PRINT	PLE.	ASE PRI	NT
Name and Address	Representing	Support	Oppose	Inf.
given AbasomAyual	DISABILITY RIS MT	V		
Brooke mounts	myself	1/_	ļ	
Heri Stewart	siy ·	1		
Brenda Desmont				
John Honsky APR	Delf TURNSPORTAL	ow wi	the Dign	t. Comm
Shelly Heilwell	MWV		J	
SARA MITTERISH	NAMI	-		
Lobert Allen	Mortary Neses Asses.	X		
HISMIT!	Self	X		

Please leave prepared testimony with Secretary. Witness Statement forms are available if you care to submit written testimony.

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Montana House of Representatives Visitors Register

HUMAN SERVICES CO	MMITTEE	Date_3	609	
Bill No. 58 83	_Sponsor(s)	Sen.	Laible	····
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Name and Address	Representing	Support	Oppose	Inf.
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BOB CLEW	MA HOSPITAL ASSI	and the second		
Al. Smith	MTLA		L	
John BARMONS	With person Der HSSOC		La company of the contract of	
Mike Foster	WMH& Cathelic Hospital	ν		
SusanBonstad	Missoula 911	W		
Dehlie Ogden	Minaule EMSCouncil &	11 V		
4				

Please leave prepared testimony with Secretary. Witness Statement forms are available if you care to submit written testimony.

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Montana House of Representatives Visitors Register

Bill No. 57 5 PLEASE PRINT		PLEASE PRINT
HUMAN SERVICES CO	Date_3	

Name and Address	Representing	Support	Oppose	Inf.
GOB OLSEN	mr Hospital Asso	Lamerton		
Mike Foster	MTHOSPITAL ASSO WMH & Catholic Hospital	s ~		
Marquet Morgan	MAPTA	W		
John Flink	MHZ	Committee of the Control of the Cont		
Smubrmorser	Billings ame	V		
	J			

Please leave prepared testimony with Secretary. Witness Statement forms are available if you care to submit written testimony.

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